

KENNEDY AXIS V

“Kaxis”

(SUBSCALES FOR AXIS V)

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**“Powerful Tool for Capturing and
Profiling your Clinical Impressions.”**

INSTRUCTION SHEET (Draft 05/01/99)

What Is the Kennedy AXIS V (Kaxis)? The Kaxis consists of seven subscales for Axis-V. These subscales capture the clinician's impression of the individual's overall "Level of Functioning" in the following areas:

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|-----------------------------|-----------------------|-------------------------|----------------------------|
| 1) Psychological Impairment | 2) Social Skills | 3) Violence | 4) ADL-Occupational Skills |
| 5) Substance Abuse | 6) Medical Impairment | 7) Ancillary Impairment | |

In addition to an individual score for each of the subscales, a patient profile can be generated using the Kaxis, as well as, a score equivalent to the Global Assessment of Functioning (GAF) Scale. This information is useful in planning treatment, measuring its impact, and in predicting outcome.

Note: If needed, Each Subscale Can Stand Alone and act as an individual questionnaire.

Using the KENNEDY AXIS V to Create Equivalents to the GAF Scale

- **GAF-Equivalent (GAF-E):** Adding up the first four subscales and dividing by four should give a score that is roughly equivalent to the GAF Scale. This should assure that the major areas of functioning are not overlooked when making the rating.
- **Dangerousness Level (DL):** The DL is roughly equivalent to the GAF's measure of dangerousness. The numbers used to derive the DL are located on the Scoring Sheet directly below each Subscale score. The lowest of these numbers becomes the DL. If the DL is 50 or less, it is often associated with the need for very high intensity outpatient care, residential care or even hospitalization.

Current, Discharge, and Highest Level of Functioning Ratings

- The **Current Rating** should be based on the level of functioning at the time of the evaluation and is most reflective of the current need for treatment or care.
- The **Discharge Rating** should be based on the level of functioning at the time of discharge and, when compared to the admission rating, is most reflective of the impact of treatment.
- The **Highest Level of Functioning** should be based on the highest level of functioning that lasted for at least a few months during the last year. This score may be very predictive of outcome.

"Best Fit" Aids in Capturing the Clinical Impression

The rating that is chosen should be guided by the **Best Fit** for the client, even though some of the thinking and/or behaviors at that level **May Not Be Characteristic of the Client**. The anchor points only serve as aids and are not required for a specific rating. Ultimately, the **Clinical Impression** is the determinant of the score and the **Best Fit** should guide one to that score, rather than a particular anchor point.

Each Subscale Measures Multiple Factors

In each subscale, rate the factor that causes the most impairment. On the "Violence" subscale the best fit should be based on **Suicidal Factors for the Suicidal Client** and on factors related to **Assaultiveness for the Assaultive Client**. On the "Substance Abuse" subscale the best fit should be based on use of **Alcohol for the Alcoholic** and use of **Drugs for the Drug Abuser**. Impairments in multiple factors should help confirm a lower rating.

Factors that relate to being withdrawn, showing lack of interest or poor motivation should be rated under "Psychological Impairment" rather than being rated under "Social Skills" or "ADL-Occupational Skills."

Effects of Treatment, Stress, Physical Limitations, Etc.

- **The Presence or Absence of Support, Medication, Other Treatments, or Even Severe Stress Generally Should Not Affect the Rating, Unless They Are Covering Up Skills.** The rating should be based on the level of functioning and no adjustment should be made for the presence or absence of these factors. Do not factor out effects of treatment, even if the patient may drop out of treatment.
- **The Effect of Physical/Environmental Limitations Generally Should Be Factored Out of the Rating.** For example, factor out not abusing drugs or not assaulting others due to being incarcerated or physically restrained; factor out not being socially active or employed due to physical constraints of being in a wheelchair or being confined to bed. Rate how functional, or dysfunctional, a client would be, if given reasonable opportunity, i.e., don't let physical barriers cover up skills or violence.

PSYCHOLOGICAL IMPAIRMENT (1)

- 100 Superior Psychological Functioning/Coping**, no psychological impairment; life's everyday problems never seem to lead to any significant anxiety or depression. **No Symptoms.**
- 90 Absent or Minimal Symptoms** (e.g., mild anxiety before an exam), good psychological functioning in all areas; interested and involved in a wide range of activities; generally satisfied with life; no more than everyday problems or concerns.
- 80 If Symptoms Are Present, They Are Transient and Expected Reaction to Psychosocial Stressors** (e.g., upset by breakup with girlfriend; difficulty concentrating after family argument; mild preoccupation with problems; a woman has many friends, functions extremely well at a difficult job, but says "The stress is too much."); not considered to have mental problems by those who know him/her.
- 70 Some Mild Symptoms** (e.g., depressed mood with mild insomnia, occasional truancy, theft within the household, difficulty trusting others, mild insensitivity to the feelings and needs of others), but generally functioning fairly well; however, those who know him/her well might express some concerns about his/her mental state.
- 60 Moderate Symptoms** (e.g., flat affect and circumstantial speech, occasional panic attacks; frequently preoccupied; moderate impairment in attention span); moderate insensitivity to the feelings and needs of others; to those who know him/her well it is clear the he/she has mental problems.
- 50 Serious Symptoms** (e.g., moderately depressed mood, moderate lethargy, severe obsessional rituals, severe phobia, severe sexual perversion, moderate problems with anorexia/bulimia, frequent shoplifting, frequent anxiety attacks, moderately guarded, mild but definite manic syndrome).
- 40 Major Psychological Impairment**; some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant; moderate paranoia; may have hallucinations or delusions; however, probably realizes they are not a part of reality); major impairment in several areas, such as judgment, thinking, or mood (e.g., depressed man avoids friends, neglects family, and is not motivated to work or moderate negative symptoms of schizophrenia); even to those who do not know him/her well would likely consider him/her to have mental problems.
- 30 Behavior Is Considerably Influenced by Delusions or Hallucinations**; appears to be responding to hallucinations; serious impairment in communication or judgment (e.g., sometimes incoherent, thinking is grossly inappropriate); severely depressed mood; withdrawn with few spontaneous communications; inability to function in almost all areas (e.g., stays in bed all day and does not care for own living space; no job, home, or friends due to paranoia, poor motivation, social withdrawal, extremely poor insight and/or being almost totally insensitive to the feelings and needs of others); at times attention span is markedly impaired; **Severe Sociopathic Behaviors Have Lead to Multiple Arrests**; severe sexual perversion toward prepubescent children.
- 20 Gross Impairment in Thinking and Communication**; manic excitement or catatonia; largely incoherent or mute; generally markedly impaired attention span; occasionally fails to maintain minimal personal hygiene due to severe lethargy or very disorganized, bizarre thinking (e.g., too lethargic to attempt to wipe food off one's shirt; smears feces for bizarre, delusional reasons).
- 10 Thinking Is Totally Disorganized**; totally insensitive to the feelings and needs of others; completely incoherent; completely mute, extremely catatonic; persistent inability to maintain minimal personal hygiene or minimal safety due to totally disorganized thinking or **Very Severe Lethargy**; unable to focus attention for even a few seconds; chronic, self-induced vomiting has lead to a very life threatening situation.

NR Not Rated

SOCIAL SKILLS (2)

- 100 Superior Social Skills;** is sought out by others because of his or her outstanding social/communication skills; has many friends and no difficulty making new friends. **No Symptoms.**
- 90 Good Social Skills;** no difficulty being pleasant and engaging; good communication skills; **Socially Effective.**
- 80 No More Than Slight Impairment in Social Skills;** slightly inappropriate social behavior leads to infrequent interpersonal conflicts; no more than slight difficulty maintaining several friendships.
- 70 Some Difficulty with Social Skills** (e.g., mild difficulty knowing how to share with others, show sympathy for others and/or understand feelings of others); social skills are not obviously impaired; generally functioning fairly well; has some meaningful interpersonal relationships.
- 60 Moderate Difficulty with Social Skills** (e.g., conflicts with peers due to inappropriate teasing or other inappropriate social behavior; attempts to be pleasant and engaging are usually moderately awkward; moderate difficulty knowing what to say even when talking with friends; moderate difficulty knowing how to share with others, show sympathy toward others and/or understand feelings of others); **Hardly Any Friends Because of Problems with Social Skills;** communications are understandable but vague.
- 50 Serious Impairment in Social Skills; Has No Friends Because of Clearly Impaired Social Skills; However, Has Some Peer Relationships, Despite Social Skills Being Clearly Impaired;** frequent conflicts with peers or co-workers because of inappropriate social behavior; conversations are often socially inappropriate; great difficulty communicating thoughts and feelings; unable to introduce self and a second person without clear difficulty; frequently intrusive; inappropriate, non-sexual touching.
- 40 Major Impairment in Social Skills; Attempts to Approach Others Quickly Leads to Embarrassing Situations;** no friends and virtually no peer relationships because of poor social skills; unable to appropriately engage in almost any social activity; continually intrusive with little understanding of the inappropriateness of the behavior; major acts of socially inappropriate behavior **Leads to Being Assaulted**, being fired from work or expelled from school; **Great Difficulty Recognizing or Coping with Inappropriate Sexual or Aggressive Advances by Others;** great difficulty recognizing that his/her sexual advances are not welcome.
- 30 Acts Grossly Inappropriately Toward Others;** virtually no understanding of the feelings of others, how to share with others and/or how to show sympathy toward others; conversations with others are grossly inappropriate; unaware of or ignores most social norms as manifested by openly masturbating, inappropriate sexual touching, etc.
- 20 Very Few Social Skills;** generally unable to communicate in an organized, understandable way, uses short phrases or gestures to get basic needs met; acts very shockingly inappropriate in front of others, such as smearing of feces or making sexual advances toward young children; however, may have some understanding that such behavior is inappropriate.
- 10 Few If Any Social Skills;** unable to communicate in an organized, understandable way; shows no apparent awareness of social norms (e.g., doesn't realize that it is inappropriate to grab food or cigarettes from others); **Extremely Vulnerable to Victimization** (e.g., has no understanding of the inappropriateness and/or dangers of approaching strangers or assaulting others; needs constant care and supervision to prevent client from getting into dangerous social situations).

NR Not Rated

VIOLENCE (3)

100 No Evidence of Violence to self or others; very satisfied with life; life's problems never seem to lead to any inappropriate anger, frustration or conflicts. **No Symptoms.**

90 No Significant Evidence of Violence to self or others; generally satisfied with life, no more than everyday problems or conflicts (e.g., an occasional argument with family members).

80 No More Than Slight Problems with anger and irritability; if symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., occasional "blow-up" with family members or friends; mild anger after family argument); no suicidal ideation.

70 Mild Symptoms (e.g., mild problems with anger and irritability; occasional thoughts of violent behavior; thoughts that life may not be worth living); symptoms are not interfering significantly with client's functioning; **Severely Assaulted Others or Serious Suicidal Attempt Over Five Years Ago**; however, for years, has had no significant problems with violence or self-harm.

60 Moderate Difficulty with Anger and Irritability (e.g., moderate conflicts with peers or co-workers due to anger and hostility; occasional threats of violent behavior); some evidence that self-destructive thoughts may be present. **Murdered Someone Over Ten Years Ago**; however, for many years, has had no significant problems with violence.

50 Serious Problems with Anger and Irritability; moderate threats of violence; becomes verbally threatening when needs/demands are not immediately met or when pushed to do something; **Occasionally Hits Someone; Occasional, Relatively Minor, Sexual Assault; Occasional Suicidal Ideation**; non-suicidal self-abuse, such as burning self with cigarettes or cutting self superficially; not felt to be a real danger of seriously hurting self or others; however, some precautions including close observation may be indicated.

40 Major Problems with Anger and Irritability; Some Real Danger of Hurting Self or Others; violent outbursts toward family and neighbors; frequent threats of violence; hitting or biting someone is not unusual; occasionally difficult to redirect from aggressive behavior; induces much fear of physical assault in others; **Single Suicidal Gesture Within the Last Month**; moderate suicidal ideation; actively making plans to hurt self or others; set a relatively minor fire within the last three months or is having fire setting impulses with history of setting one or two minor fires.

30 Often Hitting or Biting Others; becomes physically aggressive when needs are not immediately met; suicidal attempt without clear expectation of death during the last month; frequent suicidal preoccupation; actively following through with plans to hurt self or others (e.g., obtaining a gun, pills, rope, etc.); **At Times Close Observation or Restraints May Be Necessary to Prevent Serious Harm to Self or Others.**

20 Frequently Violent; very real danger of hurting self or others; serious thoughts of killing someone; attempted to viciously harm or viciously rape someone within the last month; **Constant Suicidal Preoccupation; However, Client is Felt to Have Some Control of the Suicidal Impulses**; two or more suicidal attempts without clear expectation of death within the last month; close observation to prevent harm to self or others may be required 1 or 2 days a week.

10 Persistent Danger of Severely Hurting Self or Others; attempted to kill someone within the last month; attempted to viciously harm or viciously rape a child within the last month; set a fire within the last month with intent of hurting others; serious suicidal attempt within the last month with clear expectation of death; **Little or No Control of Impulses to Hurt Self or Others**; expressing loss of control of command hallucinations to hurt self or others; 1-to-1, at arms length observation and/or physical restraint for prevention of serious harm to self or others may be required 3 or more days a week; **Murdered Someone Within the Last Two Years.**

NR Not Rated

ADL-OCCUPATIONAL SKILLS (4)

100 Superior ADL-Occupational Skills in a Wide Range of Activities (e.g., in school, on the job, as a homemaker, pursuing a complicated hobby); superior workmanship; work challenges never seen to get out of hand; is sought out by others because of his or her work skills. **No Symptoms.** Skills are consistent with that expected of a successful college graduate.

90 Good Skills in All ADL-Occupational Activities; no more than average difficulties with any work assignment. Absent or minimal symptoms. Skills are consistent with that expected of a successful high school graduate.

80 No More Than Slight Impairment in Occupational Skills or Skills in School; having slight difficulty performing at an average level; slight difficulties with routine chores, work assignments or schoolwork assignments; slight impairment in workmanship.

70 Mild Difficulty with Occupational Skills or Skills in School (e.g., minor difficulty following instructions, workmanship is somewhat sloppy), **But Generally Functioning Fairly Well.**

60 Moderate Difficulty with Occupational Skills or Skills in School (e.g., probably employed; however, has trouble carrying through assignments; some difficulty problem solving or following instructions; some difficulty driving a car; some difficulty knowing how to budget money; some difficulty maintaining a home or apartment).

50 Serious Impairment in Occupational Skills or Skills in School (e.g., unable to keep a job from more than a few weeks due to poor occupational skills; almost failing in school; moderate difficulty following instructions; moderately sloppy workmanship); needs supervision when shopping for food; some difficulty using public transportation; some difficulty preparing self a reasonable, family-style meal; some difficulty ordering, eating properly, tipping, etc. in a regular restaurant; some difficulty making a long distance phone call.

40 Major Impairment in Occupational Skills or Skills in School (e.g., unable to work at a job for any significant period or do routine housework due to poor work skills; failing in school due to poor academic skills); needs supervision to use public transportation; mild to moderate difficulty ordering and eating in a fast food restaurant; poor understanding of how to budget money.

30 No Job and Unable to Independently Maintain a Home due to serious impairment in skills needed to perform ADLs and tasks at home; serious difficulty following instructions; needs some supervision to prepare simple meals for self, such as a sandwich and beverage; needs supervision to dress self, make a local phone call, follow a very simple self-medication procedure; needs constant supervision to complete more complicated ADLs (e.g., operating a washer and dryer); very sloppy workmanship; some difficulty responding appropriately to a fire alarm; difficulty finding way back from short errands.

20 Gross Impairment in Skills Needed to Perform ADLs and Tasks at Home (e.g., needs some supervision to maintain minimal personal hygiene; is almost totally unable to follow simple instructions; needs supervision to feed self; **Unable to Function Independently** (e.g., needs constant supervision to complete most simple tasks; does not know the value of money; unable to dial 911 in an emergency; unable to find way back from short errands).

10 Demonstrates Almost No ADL Skills (e.g., is totally unable to follow instructions; unable to complete most tasks even with constant supervision; may even have to be physically assisted to complete a task, including eating or dressing. **Persistent Inability to Maintain Minimal Personal Hygiene;** considerable external support (e.g. nursing care and supervision) is needed to prevent client from accidentally harming self (e.g., wandering into traffic, danger of seriously burning self when attempting to cook or when smoking); unable to appropriately respond to a fire alarm.

NR Not Rated

SUBSTANCE ABUSE (5)

100 No Significant Problems with Drugs or Alcohol; no use or almost no use of alcohol; **NON-SMOKER;** no use of street drugs; never abuses substances, even when life's problems get out of hand; is an example of someone who is totally free of problems with substance abuse. **No Symptoms.**

90 No More Than the Average Problems and Concerns with Alcohol; minimal use of alcohol; social drinker; no use of illegal drugs; **History of Serious Alcohol or Drug Abuse with Over Ten Years of Sobriety and Minimal, If Any, Treatment Needed to Maintain Sobriety.**

80 No More Than Slight Impairment; drinks to mild intoxication about once a month; **Smokes Cigarettes Daily;** experiments with marijuana less than once a year; some mild abuse of over-the-counter medications and/or caffeine; no more than slight impairment in social, occupational, or school functioning due to substance abuse (e.g., temporarily falling behind in schoolwork); **Serious Alcohol or Drug Abuser with Over Five Years of Sobriety with Minimal Treatment Needed to Maintain Sobriety.**

70 Mild Impairment in Social, Occupational or School Functioning Due to Substance Abuse, but generally functioning fairly well; drinks to mild or moderate intoxication 1 or 2 days a week; excessive prescription drug seeking; experiments with drugs such as marijuana, Valium, Ativan, Librium once or twice a year. **Heavy Smoker; Unable to Quit Cigarettes Despite Numerous Attempts.**

60 Moderate Difficulty in Social, Occupational or School Functioning Because of Substance Abuse (e.g., substance abuse results in moderate impairment in job performance and/or conflicts with peers or coworkers); drinks on a regular basis, often to excess; drinks to moderate intoxication more than 2 days a week; occasionally experiments with drugs such as cocaine, Quaaludes, Amphetamines (speed), LSD, PCP (angel dust), inhalants; moderate abuse of over-the-counter medications and/or caffeine; **Unable to Quit Cigarettes Despite Chronic Medical Complications; Serious Alcohol or Drug Abuser with Less Than Two Years of Sobriety.**

50 Serious Symptoms; Behavior and/or Lifestyle Is Considerably Influenced by Substance Abuse; moderate drug/alcohol seeking behavior; often intoxicated when driving or when working; abusing substances despite being pregnant; unable to keep a job; marriage failing or failing school due to abuse of alcohol or marijuana; one alcohol or drug related arrest; stealing prescription pads and/or altering or forging prescriptions; moderate daily use of drugs such as marijuana, Valium, Ativan, Librium; occasionally injects drugs into skin or muscle; has a morning drug or drink to get going; uses narcotics other than heroin or cocaine on a fairly regular basis; frequently abuses over-the-counter medications and/or caffeine; **Use of Alcohol or Drugs (Other Than Cigarettes) Is Beginning to Cause Some Medical Complications.**

40 Major Impairment in Several Areas Because of Substance Abuse (e.g., alcoholic man avoids friends, neglects family, and is unable to get a job; student is failing in school and having serious conflicts with his family or roommate due to substance abuse); occasionally injects heroin or cocaine in one's veins; occasionally has an accidental drug overdose; **Severe Alcohol or Drug Abuser with Less Than One Month of Sobriety.**

30 Drugs or Alcohol Pervade One's Thinking and Behavior; One's Behavior Is Considerably Influenced by Substance Abuse; injection of heroin or cocaine into one's veins once or twice a day; abuses substances without regard for personal safety (e.g., some accidental overdoses and/or auto accidents resulting in medical hospitalizations); blackout spells; prostitutes self for drugs/alcohol; multiple alcohol or drug related arrests; serious neglect of children due to substance abuse.

20 Functioning Is Extremely Impaired by Daily Use of Drugs Such As LSD, PCP, Cocaine, Heroin, or Inhalants; unable to go for more than a few hours without significant physical and/or psychological craving for drugs or alcohol; **Continued Use of Alcohol or Drugs (Other Than Cigarettes) Is Beginning to Cause Very Serious Medical Complications** (e.g., liver failure, overt brain damage, AIDS or high risk for AIDS); **Injection of Drugs into One's Veins More Than Twice a Day.**

10 Client's Life Is Totally Controlled by Drugs or Alcohol; continually in a state of intoxication or withdrawal; at extremely high risk of seizures or DTs due to withdrawal; continually seeking drugs or alcohol; numerous alcohol or drug related arrests; **Clear Evidence That Drugs or Alcohol Will Lead to Severe Physical Harm or Death;** numerous instances of drug related accidents or accidental overdoses resulting in frequent medical hospitalizations; **Life Threatening Neglect of Children Due to Substance Abuse.**

NR Not Rated

MEDICAL IMPAIRMENT (6)

100 Superior Medical Health; physical exam and laboratory tests are normal, including no significant weight problem; illnesses never seem to affect him or her; few if any problems with even common medical problems (e.g., colds, headaches, indigestion, constipation, diarrhea); virtually never has to miss work or school due to medical problems; exercises regularly; on no medication, except may take a prophylactic medication, such as a multivitamin; doesn't wear glasses/contacts; **No Significant Medical Problems or Symptoms.**

90 Good Medical Health; has few if any medical problems; physical exam and laboratory test reveal no more than minor abnormalities; illnesses seldom seem to affect him or her; average difficulties with common medical problems (e.g., colds, headaches, indigestion, constipation, diarrhea); wears glasses/contacts that correct minor visual problems; wears dentures; only occasionally misses work or school due to medical problems; occasionally needs OTC medication.

80 IF Medical Problems Are Present, They Are Transient and Cause Minimal Impairment In Social, Occupational or School Functioning; somewhat more than average missing work or school due to medical problems; impairment in mobility, use of hands or hearing that is **Totally Corrected** by the use of a prosthesis, hearing aids, etc.; mild obesity or mild emaciation; occasional urinary incontinence due to organic problems.

70 Mild Medical Problems Which May Cause Some Difficulty in Social, Occupational or School Functioning; however, generally functioning fairly well; missing no more than about one to two weeks a year from work or school due to medical problems; mild impairment in mobility, speech, use of hands, vision or hearing despite use of prosthesis, glasses, hearing aids, etc.; chronic illness, however, has few if any overt signs or symptoms of the illness (e.g., mild asthma, mild hypertension, mild diabetes, mild arthritis; mild dysphagia; epilepsy easily controlled with medication; mild tardive dyskinesia); requires medical follow-up several times a year; taking prescription medication on a daily basis.

60 Moderate Difficulty in Social, Occupational or School Functioning Due to Medical Problems; missing no more than about one month a year from work or school due to medical problems (e.g., moderate asthma, moderate hypertension, moderate diabetes, moderate COPD, mild to moderate hyponatremia secondary to polydipsia, HIV positive, chronic hepatitis, mild cerebral palsy, mild cystic fibrosis, mild hemophilia, mild angina on exertion); medical problems requiring daily or weekly monitoring and treatments beyond p.o. medications (e.g., injections, blood levels, nebulizer, physical therapy); needs bladder bag.

50 Serious Impairment in Social, Occupational or School Functioning Due to Medical Problems; serious impairment in mobility, speech, use of hands, vision or hearing despite use of prosthesis, glasses, hearing aids, etc.; considered a serious risk for falling; only partially controlled epilepsy; equipment is needed for mobility (e.g., wheelchair, portable oxygen); **Medical Problems Prevent One from Driving a Car.**

40 Major Impairment in Several Areas (such as work or school or family relations) because of medical problems; missing about two months a year or more from work or school due to medical problems; medical problems results in major impairment in mobility, speech, use of hands, vision, or hearing despite use of prosthesis, glasses, hearing aids, etc.; frequently confined to bed or wheelchair because of chronic medical problems.

30 Behavior and/or Lifestyle Is Considerably Influenced by Medical Problems; very serious medical problems confine one to bed or wheelchair most of the time (e.g., very symptomatic metastatic cancer, multiple sclerosis, cerebral palsy or AIDS); chronic failure of a major body system (e.g., heart, lung, kidney, liver); on dialysis for kidney failure.

20 Major Medical Problems Confine One to Bed All of the Time and intensive, continuous medical treatment is required without which one would rapidly progress to death (e.g., **Late Stages** of metastatic cancer, multiple sclerosis; AIDS, etc.); chronic, near terminal failure of a major body system (e.g., heart, lung, kidney, liver); quadriplegic.

10 Chronic Medical Incapacity Requiring Basis Life Support (e.g. respirator); removal of life support would rapidly lead to death; patient in chronic vegetative or near vegetative state; persistent delirium or coma.

NR Not Rated

ANCILLARY IMPAIRMENT (7)

100 Superior Life Situation; currently in or has ready access to ideal living environment (neighborhood, home, school, work, etc.); superior financial resources for his/her needs; no legal problems; extremely safe environment; **No Significant Ancillary Problems or Symptoms.**

90 Good Life Situation; has few if any ancillary problems; no more than minor problems with living environment, financial resources and/or legal problems, e.g., occasionally living environment doesn't fully meet one's needs, rare late payment on a bill, rare parking or traffic ticket.

80 If Ancillary Problems Are Present, They Are Transient and Cause No More Than Minimal Difficulty with one's Living Situation, Financial Resources or the Law; somewhat more than average problems with one's living environment, financial resources or legal problems.

70 Mild Ancillary Problems, e.g., Some Difficulty in one's Living Environment, Financial Resources or with the Law; mild difficulty paying bills/credit cards; mild difficulty with parking or traffic tickets; occasional mild verbal violence in one's environment; **However, Generally Safe Living Situation.**

60 Moderate Difficulty with Living Situation, Finances or the Law; high risk for being in a dangerous homeless or jail situation; criminal charges place one at high risk of incarceration; no stable residence and/or income, often having to move from one living situation to another; moderate difficulty paying bills/credit cards; **Evaluation and/or Disposition Is Being Made for Nonviolent Criminal Activity** (e.g., trespassing, stealing, defacing/destruction of property, or lewd behavior); **Evaluation and/or Disposition Is Being Made for Competency to Make Decisions Concerning Person, Estate and/or Treatment.**

50 Serious Problems with Living Situation, Finances and/or the Law; frequent risks or threats of moderate violence in one's environment; **Evaluation and/or Disposition Is Being Made for Relatively Minor, But Violent or Dangerous Criminal Activity,** (e.g., minor assault, threats to do physical harm, driving while under the influence, sexually touching someone or exposing oneself); **Serious Placement Difficulties, Even When Ready for Placement.**

40 Major Problems with Living Situation, Finances and/or the Law; Some Real Danger of Being Physically Injured in one's Environment; **Evaluation and/or Disposition Is Being made for Very Violent Criminal Activity** (e.g., vicious assault, attempted rape, attempting to molest a child, arson).

30 Lifestyle Is Considerably Influenced by Ancillary Problems; one is in a very dangerous homeless or jail situation most of the time; unable to obtain basic food, shelter and/or clothing; frequent, mild to moderate physical injuries from violence in one environment.

20 Major Ancillary Problems (e.g., One Is in a Very Dangerous Homeless or Jail Situation All of the Time); at times one's life is at serious risk due to lack of resources for basic food, shelter and/or clothing or because of high level of violence in one's environment; **Evaluation and/or Disposition Is Being Made for Extremely Serious Criminal Charges** (e.g., attempted murder, vicious rape, viciously molesting a child).

10 Living/Financial Situation Is Totally Inadequate; one's life is continually at serious risk due to lack of basic food, shelter and/or clothing or because of extremely high level of violence in one's environment; **Evaluation and/or Disposition Is Being Made for the Most Extreme Charges of Violence** (e.g., murdering anyone, very viciously harming or very viciously raping a child, arson with intent of hurting others).

NR Not Rated

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